

**DEPARTMENT OF PUBLIC WORKS
LETTER OF PERMISSION
LEAVES COMPOST**

I hereby authorize the Town of Greece to enter upon my property with men and/or machinery, for the purpose of delivering **LEAVES COMPOST**. By entering my property, I understand that the Town of Greece is not responsible for any damage done to the lawn or driveway, within reason. The load(s) of material will be dumped in the driveway, or an area next to the driveway only.

Please note: It is strongly recommended that you look at a sample of the product prior to completing this form. **Samples are on display at our facility at 647 Long Pond Road.** The Town **will not come back** to pick up product for any reason.

Date:
Resident:
Address:
Daytime Telephone Number:
Location for Dumping Leaves Compost:
Number of Loads Requested (approx. 5 cu. yd. per load):

DPW Use Only:

Date delivered	Driver	Truck No.	No. of loads
Date delivered	Driver	Truck No.	No. of loads

Please sign and return to:

**Town of Greece Public Works
647 Long Pond Rd
Rochester, NY 14612**

Signature: _____